CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS

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COVER PAGE

Please type or print in ink.		71110 4	IPR -2 PM 1: 08	
NAME OF FILER (LAST)	(FIRST)	LUIU P	(MIDDLE)	
Flores	William	the form of the second	Marshall	
1. Office, Agency, or Court			WHI PERMITTING	
Agency Name (Do not use acronyms)				
California Department of Natural Re	sources			
Division, Board, Department, District, if applicat		Your Position		
Oil, Gas, and Geothermal Resource	s (Headquarters)	Associate Oil and Gas Eng	jineer	
▶ If filing for multiple positions, list below or on an attachment. (Do not use acronyms)				
Agency:		Position:		
2. Jurisdiction of Office (Check at least	t one box)			
▼ State	·	☐ Judge or Court Commissioner (St	atewide Jurisdiction)	
Multi-County		County of	•	
City of		Other		
3. Type of Statement (Check at least one	e box)			
Annual: The period covered is January 1, December 31, 2017.		Leaving Office: Date Left (Check one)		
The period covered is/ December 31, 2017.	/, through	O The period covered is Januar leaving office,	y 1, 2017, through the date of	
Assuming Office: Date assumed		O The period covered is the date of leaving office.	/, through	
Candidate: Date of Election	and office sought, if	different than Part 1:	1000	
4. Schedule Summary (must comple	ete) ► Total number o	f pages including this cover page	Øe:	
Schedules attached				
Schedule A-1 - Investments - schedule	attached	Schodulo C. Income Leans & Dustant	D	
Schedule A-2 - Investments - schedule		Schedule C - Income, Loans, & Business Schedule D - Income Gifts schedule		
Schedule B - Real Property - schedule		Schedule E - Income - Gifts - Travel Pa		
-Or-			monto – scriedule attacrieu	
▼ None - No reportable interests on	any schedule			
5. Verification		de antigen, commente en grafficher, deur de 1864 fan 'e en de 1867 de de 1864 antigen antigen.		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Docum	ent) CITY	STATE	ZIP CODE	
7972 Pocket Road, Apt. 127	Sacrame	ento CA	95831	
DAYTIME TELEPHONE NUMBER		-MAIL ADDRESS	33001	
(916) 955-1811	Jv.	William.Flores@conservation.ca.gov		
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.				
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
Date Signed 4/2/2018	Sian	nature		
(month, day, year)		(File the originally signed stateme	nt with your filing official.)	